

Asset Verification – Student

2022-2023

Student Name (please print) _____

Student ID (if known) _____

Additional information is required regarding the assets you reported on the FAFSA and/or CSS Profile. Please note:

- **Do not leave any of these questions blank.**
- If a question does not apply to you, please write \$0 or N/A.
- For **all** assets, report the amounts **as of the date you completed the FAFSA** or today's date (whichever came first).

1. Student Information

Whose information is reported on this form? (Check all that apply) Student Spouse

2. Cash, Checking and Savings

Total value of cash, savings and checking: \$ _____

List banks or other institutions where you have checking or savings accounts and list the balances in those accounts.

Institution 1	\$ _____ Balance 1
---------------	-----------------------

Institution 2	\$ _____ Balance 2
---------------	-----------------------

Institution 3	\$ _____ Balance 3
---------------	-----------------------

Institution 4	\$ _____ Balance 4
---------------	-----------------------

3. Home

Do you own the home where you reside? Yes No

Address of Home

(Please list the physical address. Do NOT list P.O. Boxes.)

\$ _____	Market Value
\$ _____	Debt (1 st & 2 nd mortgages)
\$ _____	Purchase Price
_____	Purchase Year
_____	Percent Ownership

Is this a multi-family home? Yes No

If yes, list number of dwellings: _____

Do you rent this property to others? Yes No

If yes, list date you began renting (month/year): _____

If yes, list what percent of your home you rent: _____

If you rent to family, list name(s)/relation: _____

4. Other Real Estate

Do you own real estate other than the home where you reside? Yes No

Address of Property 1

(Please list the physical address. Do NOT list P.O. Boxes.)

\$ _____	Market Value
\$ _____	Debt
\$ _____	Purchase Price
_____	Purchase Year
_____	Percent Ownership

Address of Property 2

(Please list the physical address. Do NOT list P.O. Boxes.)

\$ _____	Market Value
\$ _____	Debt
\$ _____	Purchase Price
_____	Purchase Year
_____	Percent Ownership

*If you own more than two properties, itemize each additional property on a separate sheet of paper and attach it to this form.

Asset Verification – Student

2022-2023

Student Name (please print) _____

Student ID (if known) _____

5. Business/Farm

Do you own a business and/or farm? (Check all that apply) Business Farm Neither

If you own a farm, do you live on the farm for more than 50% of the year? Yes No

Address of Business/Farm 1 (Please list the physical address. Do NOT list P.O. Boxes.)	<table style="width: 100%; border-collapse: collapse;"> <tr><td style="border-bottom: 1px solid black; width: 20%;">\$</td><td style="width: 30%;"></td><td style="width: 50%;">Market Value</td></tr> <tr><td style="border-bottom: 1px solid black;">\$</td><td></td><td>Debt</td></tr> <tr><td style="border-bottom: 1px solid black;">\$</td><td></td><td>Purchase Price</td></tr> <tr><td style="border-bottom: 1px solid black;"></td><td></td><td>Year Purchased/Opened/Inherited</td></tr> <tr><td style="border-bottom: 1px solid black;"></td><td></td><td>Percent Ownership</td></tr> <tr><td style="border-bottom: 1px solid black;"></td><td></td><td>Number of Employees</td></tr> </table>	\$		Market Value	\$		Debt	\$		Purchase Price			Year Purchased/Opened/Inherited			Percent Ownership			Number of Employees
\$		Market Value																	
\$		Debt																	
\$		Purchase Price																	
		Year Purchased/Opened/Inherited																	
		Percent Ownership																	
		Number of Employees																	

Address of Business/Farm 2 (Please list the physical address. Do NOT list P.O. Boxes.)	<table style="width: 100%; border-collapse: collapse;"> <tr><td style="border-bottom: 1px solid black; width: 20%;">\$</td><td style="width: 30%;"></td><td style="width: 50%;">Market Value</td></tr> <tr><td style="border-bottom: 1px solid black;">\$</td><td></td><td>Debt</td></tr> <tr><td style="border-bottom: 1px solid black;">\$</td><td></td><td>Purchase Price</td></tr> <tr><td style="border-bottom: 1px solid black;"></td><td></td><td>Year Purchased/Opened/Inherited</td></tr> <tr><td style="border-bottom: 1px solid black;"></td><td></td><td>Percent Ownership</td></tr> <tr><td style="border-bottom: 1px solid black;"></td><td></td><td>Number of Employees</td></tr> </table>	\$		Market Value	\$		Debt	\$		Purchase Price			Year Purchased/Opened/Inherited			Percent Ownership			Number of Employees
\$		Market Value																	
\$		Debt																	
\$		Purchase Price																	
		Year Purchased/Opened/Inherited																	
		Percent Ownership																	
		Number of Employees																	

*If you own more than two businesses/farms, itemize each additional business/farm on a separate sheet of paper and attach it to this form.

6. Investments

Do you own investments, such as stocks, bonds, certificates of deposit, trust funds, mutual funds, etc.? Yes No

If yes, list the value of all investments for yourself and your spouse (if applicable).

\$ _____

Do you have a retirement account, such as a 401(k), 403(b) or IRA? Yes No

If yes, list the value of all retirement accounts for yourself and your spouse (if applicable).

\$ _____ Student Value

\$ _____ Spouse Value (if applicable)

Do you have a college savings plan, such as a 529 plan, UTMA or UGMA? Yes No

If yes, list the value of all 529 plans and the value of all UTMA's & UGMA's, as well as the account owner.

Type of Account	Account Owner	Value
Example: 529 Plan	Grandparent	\$10,000
Example: UGMA	Self	\$5,000

Independent students with dependent children only: Do you or your spouse (if applicable) own any 529 plans with your child(ren) as the beneficiary? Yes No

If yes, list the value of all 529 plans owned by you or your spouse (if applicable) for all dependent children.

\$ _____

7. Certification

I certify that the information reported on this form and all supporting documentation is true and accurate to the best of my knowledge. I understand that false statements or misrepresentations will be cause for denial, reduction, withdrawal and/or repayment of financial aid.

Student Signature _____

Date _____